## DEPARTMENT OF SOCIAL AND HEALTH SERVICES MEDICAL ASSISTANCE ADMINISTRATION Olympia, Washington

To: Pharmacists Memorandum No. 04-58 MAA

Managed Care Plans Issued: June 28, 2004

From: Douglas Porter, Assistant Secretary For further information, go to:

Medical Assistance Administration http://maa.dshs.wa.gov/pharmacy/

**Subject:** Prescription Drug Program: Maximum Allowable Cost Update

Effective for dates of service on and after July 1, 2004, the Medical Assistance Administration (MAA) will implement the following changes to the Prescription Drug Program:

1. New additions to the Maximum Allowable Cost (MAC) list;

- 2. Deletions from the MAC list; and
- 3. Adjustments to existing MACs.

## 1. MAC Additions:

			MAC
			Effective
Generic Name	Strength	Form	07/01/04
AMPHET ASP/AMPHET/			
D-AMPHET	7.5MG	TABLET	\$1.04000
AMPHET ASP/AMPHET/			
D-AMPHET	12.5MG	TABLET	\$1.04000
ASPIRIN	81MG	TABLET DR	\$0.00900
ASPIRIN	81MG	TAB CHEW	\$0.02959
BENAZEPRIL HCL	5MG	TABLET	\$0.14940
BENAZEPRIL HCL	10MG	TABLET	\$0.14940
BENAZEPRIL HCL	20MG	TABLET	\$0.14940
BENAZEPRIL HCL	40MG	TABLET	\$0.14940
D-AMPHETAMINE			
SULFATE	5MG	CAPSULE SA	\$0.61200
D-AMPHETAMINE			
SULFATE	15MG	CAPSULE SA	\$0.98000
NABUMETONE	500MG	TABLET	\$0.62540

## 2. MAC Deletions:

			MAC Effective
Generic Name	Strength	Form	07/01/04
CHLORAL HYDRATE	500MG	CAPSULE	\$0.00000
GENTAMICIN SULFATE	0.3%	OINTMENT	\$0.00000

## 3. MAC Adjustments:

Generic Name	Strength	Form	MAC Effective 07/01/04
CYANACOBALAMIN	1000MCG/ML	VIAL	\$0.16000
FLUOXETINE HCL	40MG	CAPSULE	\$1.38000
PHENOBARBITAL	20MG/5ML	ELIXIR	\$0.01200